

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | IS NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | AM-J | 12 | 04/14/01 |
| O.I.P.E. CLASSIFIER | | 1079 | 9/21 |
| FORMALITY REVIEW | H-L | 925 | 10/16/01 |
| RESPONSE FORMALITY REVIEW | Request | | 04-24-02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | 06/19/03 | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | ✓ | | |
| 7 | 0 | | |
| 8 | 0 | | |
| 9 | 0 | | |
| 10 | ✓ | | |
| 11 | | | |
| 12 | | | |
| 13 | | | |
| 14 | ✓ | | |
| 15 | 0 | | |
| 16 | 0 | | |
| 17 | 0 | | |
| 18 | 0 | | |
| 19 | ✓ | | |
| 20 | ✓ | | |
| 21 | ✓ | | |
| 22 | 0 | | |
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| 33 | ✓ | | |
| 34 | ✓ | | |
| 35 | ✓ | | |
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| 39 | ✓ | | |
| 40 | 0 | | |
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| 46 | ✓ | | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy

2/10/04 4/24/02
 829
 10/16